

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee RIGEL STRATEGIES LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 24 / 2016	
Mailing Address 3948 LEGACY DRIVE STE 106-282		Amount 13333.33	
City PLANO	State TX	Zip Code 75023	Transaction ID : SE.5254
Purpose of Expenditure MEDIA	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 01 / 14 / 2016	
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee RIGEL STRATEGIES LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 24 / 2016	
Mailing Address 3948 LEGACY DRIVE STE 106-282		Amount 13333.33	
City PLANO	State TX	Zip Code 75023	Transaction ID : SE.5255
Purpose of Expenditure MEDIA	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 01 / 14 / 2016	
Name of Federal Candidate MARCO RUBIO		<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OK	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	26666.66
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

JACQUELYN JAMES

[Electronically Filed]

Date

MM / DD / YYYY
02 / 25 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 2 OF 4
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) KEEP THE PROMISE I	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00575373 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee RIGEL STRATEGIES LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 24 / 2016</div> </div>	
Mailing Address 3948 LEGACY DRIVE STE 106-282			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">13333.34</div>	
City PLANO	State TX	Zip Code 75023	Transaction ID : SE.5256 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 01 / 14 / 2016</div> </div>	
Purpose of Expenditure MEDIA		Category/Type	Name of Federal Candidate MARCO RUBIO	
<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TN		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">13333.34</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee RIGEL STRATEGIES LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 24 / 2016</div> </div>	
Mailing Address 3948 LEGACY DRIVE STE 106-282			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">31220.66</div>	
City PLANO	State TX	Zip Code 75023	Transaction ID : SE.5260 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 01 / 14 / 2016</div> </div>	
Purpose of Expenditure MEDIA		Category/Type	Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: TN		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">44554.00</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">44554.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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JACQUELYN JAMES

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Date

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 02 / 25 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 3 OF 4
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NAME OF COMMITTEE (In Full) KEEP THE PROMISE I		FEC IDENTIFICATION NUMBER ▼ C C00575373	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee RIGEL STRATEGIES LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 24 / 2016	
Mailing Address 3948 LEGACY DRIVE STE 106-282		Amount 31220.67	
City PLANO	State TX	Zip Code 75023	Transaction ID : SE.5261
Purpose of Expenditure MEDIA	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 01 / 14 / 2016	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OK	
Calendar Year-To-Date Per Election for Office Sought 44554.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee RIGEL STRATEGIES LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 24 / 2016	
Mailing Address 3948 LEGACY DRIVE STE 106-282		Amount 31220.67	
City PLANO	State TX	Zip Code 75023	Transaction ID : SE.5262
Purpose of Expenditure MEDIA	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 01 / 14 / 2016	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought 44554.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	62441.34
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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JACQUELYN JAMES

[Electronically Filed]

Date

MM / DD / YYYY
02 / 25 / 2016

Signature

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.

Form/Schedule: SE
Transaction ID : SE.5261

These independent expenditures were made with funds paid to the vendor on 1/14/16 and reported on 1/15/16. The committee will amend its prior reports to show that the transactions were edited to add additional states to the original media buy.

Form/Schedule:
Transaction ID: